

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 302 OF 510
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

The Northwestern Mutual Life Insurance Company Federal PAC

Full Name (Last, First, Middle Initial)

A. Charles R. Pruett

Mailing Address 1019 Stonewall Dr

City

Nashville

State

TN

Zip Code

37220-1022

FEC ID number of contributing
federal political committee.

C

Name of Employer

Self-Employed

Occupation

General Insurance Agent

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

2496.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	30	/	2015

Transaction ID : 2015043019748-49

Amount of Each Receipt this Period

208.00

Full Name (Last, First, Middle Initial)

B. Charles R. Pruett

Mailing Address 1019 Stonewall Dr

City

Nashville

State

TN

Zip Code

37220-1022

FEC ID number of contributing
federal political committee.

C

Name of Employer

Self-Employed

Occupation

General Insurance Agent

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

2496.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	15	/	2015

Transaction ID : 2015051519752-48

Amount of Each Receipt this Period

208.00

Full Name (Last, First, Middle Initial)

c. Charles R. Pruett

Mailing Address 1019 Stonewall Dr

City

Nashville

State

TN

Zip Code

37220-1022

FEC ID number of contributing
federal political committee.

C

Name of Employer

Self-Employed

Occupation

General Insurance Agent

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

2496.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	31	/	2015

Transaction ID : 2015052919757-48

Amount of Each Receipt this Period

208.00

SUBTOTAL of Receipts This Page (optional)..... ►

624.00

TOTAL This Period (last page this line number only)..... ►